PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

			S	ecretar	y of Stat	te		05	S APR	-4 P	M 3: 01	0			
DOCUMENT # \\D\Z\O\O\O\S\Z\S\O\ 1. Corporation Name CHINA GLASS WAREHOUSE LOFTS CONDOMINIUM ASSOCIATION, INC.									ECRL)	MAY U	F STAT	DA	. 1		
2. Principal Office Address 11 N. SUMMERLIN AVENUE				3. Mailing Office Address 11 N. SUMMERLIN AVENUE					_	02	205		WY	R	
Suite, Apt. #, etc.				Suite, Apt. #, etc.							07/42/20	02	14	77	
City & State ORLANDO, FL				City & State ORLANDO, FL				FEI Number		Jilua (07712720	√ App			
Country UNITED STATES		^{Zip} 32801		Country UNITE	· 1 b.		6. S8.75				Additional	Fee require	ed		
7. Name and Address of Current Registered Agent														_	
DON AS		06/02/	050	11039-	-017 ×	¥358.	75								
Street Address (P.O. Box Number is Not Acceptable) 52 E. SOUTH STREET											,,,,_	-			
Suite, Apt. #															
City ORLANI	00								State FL	Zip Code 32801	e			CR2E081 (01/05)	
8. 1, being appointed the registered agent of the above named corporation, am familiar with and accept the ob- Signature of Registered Agent REGISTERED AGENT MUST SIGN										bligations of section 607.0505 or 617.0503, F.S. Date 03/09/2005					
s and Street Ad	dresses	of Each Officer and	Vor Director (Flor	rida nonpro	fit corporat	ions must list at le	east 3	directors)				-		1	
	Name of rs and/or Directors												1		
PHILIP C. RAMPY			11 N. SUMMERLIN AVEN					JE ORLANDO, FL 32801							
CRAIG T. USTLER			608 E. CENTRAL BLVD.					ORLANDO, FL 32801							
DARIN D	OBS	ON	11 N. SUMMERLIN AVENU				IUE	JE ORLANDO, FL 32801							
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	•									-	-			1	
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE:															
	NSTATEMI UMENT ration Name A GLASS W Dal Office Addres SUMMERL #, etc. te NDO, FL Name DON AS Street Addr 52 E. SO Suite, Apt. # City ORLANI g appointed the of d Agent CRAIG T DARIN D CRAIG T DARIN D T T T T T T T T T T T T T	A GLASS WARE Dal Office Address SUMMERLIN AV #, etc. The NDO, FL Countr UNIT Name DON ASHER Street Address (P.6 52 E. SOUTH Suite, Apt. #, Etc. City ORLANDO The gappointed the register of did Agent CRAIG T. UST DARIN DOBS ATURE:	NSTATEMENT UMENT # D2 000 (ration Name A GLASS WAREHOUSE LOFT Dall Office Address SUMMERLIN AVENUE #, etc. te NDO, FL Country UNITED STATES Name DON ASHER & ASSOCIAT Street Address (P.D. Bdx Number is Note 52 E. SOUTH STREET Suite, Apt. #, Etc. City ORLANDO g appointed the registered agent of the abort of dagent RE sand Street Addresses of Each Officer and Officers and/or Directors PHILIP C. RAMPY CRAIG T. USTLER DARIN DOBSON ATURE:	UMENT # \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Secretan DIVISION OF COUNTY WAS A GLASS WAREHOUSE LOFTS CONDOMINIUM A GLASS WAREHOUSE LOFTS SAILE AND A GLASS WAREHOUSE LOFTS WAS A GLASS WAREHOUSE LOFTS WAREHOUSE LOFTS WAREHOUSE LOFTS WAS A GLASS WAS A GLASS WAREHOUSE LOFTS WAS A GLASS	Secretary of Star DIVISION OF CORPORATE STATEMENT WHENT # WOZ OOO CO 528 Control of Agent State of Base of Ba	Secretary of State DIVISION OF CORPORATIONS UMENT # \OZ_ODOCOS_28O ration Name A GLASS WAREHOUSE LOFTS CONDOMINIUM ASSOCIATION, Sal Office Address SUMMERLIN AVENUE 11 N. SUMMERLIN AVENUE 12 In Summer Address SUMMERLIN AVENUE 13. Mailing Office Address SUMMERLIN AVENUE 14. etc. Suite, Apt. #, etc. City & State ORLANDO, FL Country UNITED STATES 75. Name and Address of Current Registe Name DON ASHER & ASSOCIATES, INC. Street Address (P.D. Bdx Number is Not Acceptable) S2 E. SOUTH STREET Suite, Apt. #, Etc. City ORLANDO g appointed the registered agent of the above named corporation, am familiar with and accept the of Agent REGISTERED AGENT MUST SIGN Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at Street Addresses of Each Officer and/or Directors PHILIP C. RAMPY 11 N. SUMMERLIN AVEN CRAIG T. USTLER 608 E. CENTRAL BLVD. 11 N. SUMMERLIN AVEN 12 DARIN DOBSON 11 N. SUMMERLIN AVEN 13 ABOVE CRAIG T. USTLER 14 DARIN DOBSON 15 DARIN DOBSON 16 DARIN DOBSON 17 N. SUMMERLIN AVEN 18 DARIN DOBSON 18 DARIN DOBSON 19 DARIN DOBSON 11 N. SUMMERLIN AVEN 19 DARIN DOBSON 11 N. SUMMERLIN AVEN 11 N. SUMMERLIN AVEN 12 DARIN DOBSON 11 N. SUMMERLIN AVEN 13 DARIN DOBSON 14 DARIN DOBSON 15 DARIN DOBSON 16 DARIN DOBSON 17 DARIN DOBSON 18 DARIN DOBSON 19 DARIN DOBSON 11 N. SUMMERLIN AVEN 19 DARIN DOBSON 11 N. 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RAMPY 11 N. SUMMERLIN AVENUE (If y that I am an officer or director or the receiver or trustee empowered to execute this application as proving that corporation have been paid and the names of Individuals listed on this form on or qualify for an es a application is true and accurate, and my signature shall have the same legal effect as if made under our structure. ATURE:	Secretary of State DIVISION OF CORPORATIONS OF TAIN INTERMENT # \OZ_OOOO_528O SITUMENT # \OZ_OOOOO_528O SITUMENT # \OZ_OOOOOO_528O SITUMENT # \OZ_OOOOO_528O SITUMENT # \OZ_OOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO	Secretary of State DIVISION OF COMPORATIONS UMENT # NOZ 000005280 A GLASS WAREHOUSE LOFTS CONDOMINIUM ASSOCIATION, DOI Office Address SUMMERLIN AVENUE 11 N. SUMMERLIN AVENUE 11 N. 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